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CONFIRMATION NO. 6576

SERIAL NUMBER 10/785,388	FILING DATE 02/23/2004 RULE	CLASS 606	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 121-02
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APPLICANTS

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**** CONTINUING DATA *******
 This appln claims benefit of 60/448,965 02/21/2003 ✓

**** FOREIGN APPLICATIONS *******
none (circled)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **** SMALL ENTITY ****
**** 05/14/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	STATE OR COUNTRY TX	SHEETS DRAWING 12	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 3
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 80301

TITLE
 Bone and cartilage implant delivery device

FILING FEE RECEIVED 531	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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